

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: <u>9/22/04</u>		2 Serial/Patent # <u>10773,242</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input checked="" type="checkbox"/> Filing			\$
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/> Petition		<u>7/29/04</u>	\$ 130.00
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$
		7 TOTAL AMOUNT OF REFUND	<u>\$ 130.00</u>
8 TO BE REFUNDED BY:			
<input type="checkbox"/> Overpayment		Treasury Check	
<input type="checkbox"/> Duplicate Payment		Credit Deposit A/C #:	
<input checked="" type="checkbox"/> No Fee Due (Explanation): <i>Petram General</i>		9 <u>50 -- 2827</u>	
10 REASON:			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>CHARLEN A GRANT</u>		TITLE: <u>Attress</u>	
SIGNATURE: <u>Charlen Grant</u>		PHONE: <u>300-0251</u>	
OFFICE: <u>Patent</u>		*****	
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED: <u>Alice Miller</u>		DATE: <u>9/23/04</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B